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## FORM D

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:					
Estimated average					
hours per respon	se16.00				

SEC USE ONLY						
Profix	Serial					
DATE P	ECEIVED					
	1					

has abanced and indicate	change)	· · · · · · · · · · · · · · · · · · ·	
Name of Offering ( check if this is an amendment and name has changed, and indicate	change.)		
Initial Common Stock Issuance	Section 4(6)	☐ ULOE	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	36011011 4(0)	U oron	
Type of Filing:			
A. BASIC IDENTIFICATION D	ATA		9.55
1. Enter the information requested about the issuer			( )
Name of Issuer ( check if this is an amendment and name has changed, and indicate cha	inge.)		130/5
Martell Systems, Inc.		m ( )	
Address of Executive Offices (Number and Street, City, State	, Zip Code)	_	mber (Including Area Code)
509 Highland Drive, Suite D, River Falls, WI 54022		(715) 426-0552	
Address of Principal Business Operations (Number and Street, City, State	e, Zip Code)	Telephone No	umber (Including Area Code)
(if different from Executive Offices)		same as above	, <b>,</b>
same as above PROC	たろうと	Same as above	
Brief Description of Business			THE RESERVE THE PROPERTY OF THE PARTY OF THE
Drug Discovery and Development	2 4 2007		
Type of Business Organization    corporation		olease specify,	07040505
Month Year  Actual or Estimated Date of Incorporation or Organization: OB O6. Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia CN for Canada; FN for other foreign jurisd	ation for State	mated e: DE	
THE PARTY OF THE P			

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a tederal notice.



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<ul><li>Each beneficial ow</li><li>Each executive off</li></ul>	he issuer, if the iss ner having the pow icer and director of	uer has been organized wer to vote or dispose, or di			f a class of equity securities of the issue partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, i Pass, Franklin	f individual)				
Business or Residence Addre 509 Highland Drive, Suite		Street, City, State, Zip Co WI 54022	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		<del></del>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
	(Use bla	ink sheet, or copy and use	additional copies of this s	sheet, as necessary	·/)

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1.	Has the	issuer solo	I, or does th								***************************************	Yes	No 😿
•	X10 4 !-	41!-:	um investn			Appendix						s no	minimum
2.												Yes	No
3.			permit joint									X	
4.	commiss If a perse or states	sion or sim on to be lis . list the na	ion request ilar remune ted is an ass ame of the b you may se	ration for s sociated pe roker or de	oficitation rson or age caler. If mo	of purchase int of a broke ore than five	ers in conne ter or deale e (5) persor	ection with r registered is to be list	sales of sed with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Ful	Name (I	ast name	first, if indi	ividual)				•					
Bus	iness or l	Residence	Address (N	lumber and	l Street, C	ty, State, Z	Cip Code)						
Nar	ne of Ass	ociated Bi	oker or De	aler									
Stat			Listed Has										
	(Check	'All States	s" or check	individual	States)							☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (I	ast name	first, if indi	ividual)				····			···		
Bus	iness or	Residence	: Address (1	Number an	d Street, C	city, State, 2	Zip Code)			_,			
Nar	ne of Ass	ociated Bi	roker or De	aler	· ·			<u> </u>		·	· ·		
Stat			Listed Has							<del></del> + · ·		-	
	(Check	"All State:	s" or check	individual	States)	***************************************		***************************************		•••••	***************************************	☐ AI	l States
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Ful	l Name (l	Last name	first, if ind	ividual)		<del>-</del>	•						
Bus	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)			<u> </u>			
Nar	ne of Ass	ociated B	roker or De	aler						<del></del>			
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	. <del></del>		· · · · · · · · · · · · · · · · · · ·			
	(Check	"All State	s" or check	individual	States)					••••		☐ Al	1 States
	AL IL MT ŘÍ	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregata	Amount Alread
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		\$
	Equity	2,000.00	\$ 2,000.00
	Convertible Securities (including warrants)	3	_ s
	Partnership Interests	S	_ \$
	Other (Specify)	3	_ \$
	TotalS	2,000.00	\$ 2,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 2,000.00
	Non-accredited Investors	•	\$ 0.00
	Total (for filings under Rule 504 only)		<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$ 0.00
	Regulation A	V/A	\$_0.00
	Rule 504	<b>N/A</b>	\$_0.00
	Total		\$_0.00
•	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		-
	Transfer Agent's Fees		s 0.00
	Printing and Engraving Costs		\$ <u>0.00</u>
	Legal Fees		\$ 2,000.00
	Accounting Fees	_	\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)		\$_0.00
	Total		\$ 2,000.00

Enter the difference between the aggregate off total expenses furnished in response to Part C	MBER OF INVESTORS, EXPENSES AND USE OF Pering price given in response to Part C — Question 1	ROCEEDS .	
total expenses furnished in response to Part C-	ering price given in response to Part C — Question 1		
	- Question 4.a. This difference is the "adjusted gross		\$
of the purposes shown. If the amount for a k the box to the left of the estimate. The total			
		Payments to	
			D
		Affiliates	Payments to Others
ries and fees		¬\$	□\$
	-	<del></del> '	
hase, rental or leasing and installation of m	achinery	-	_
equipment	[	<b>]</b> \$	<b>\$</b>
struction or leasing of plant buildings and fa	acilities[		<b>S</b>
ring that may be used in exchange for the as	sets or securities of another	¬ <b>¢</b>	
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• .			
er (specify):		_] <b>&gt;</b>	L.
			<b>\$</b>
ımn Totals	[	\$ 0.00	\$_0.00
l Payments Listed (column totals added)		\$_0.0	00
	D. FEDERAL SIGNATURE	5.17.4	
constitutes an undertaking by the issuer to for	urnish to the U.S. Securities and Exchange Commis	sion, upon writter	e 505, the following n request of its staff,
rint or Type)	Signature . A	Date	<del>,</del>
•	Franklin Kass	<u> </u>	9.06
Signer (Print or Type)	Title of Signer (Print or Type)		
-	President		<del>-</del>
	chase of real estate	chase of real estate  chase of real estate  chase, rental or leasing and installation of machinery equipment  chase, rental or leasing of plant buildings and facilities  unistion of other businesses (including the value of securities involved in this ring that may be used in exchange for the assets or securities of another er pursuant to a merger)  ayment of indebtedness  king capital  cr (specify):  Imm Totals  Al Payments Listed (column totals added)  D. FEDERAL SIGNATURE  Thas duly caused this notice to be signed by the undersigned duly authorized person. If this notice constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis mation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R  Trint or Type)  Systems, Inc.  Signature  Title of Signer (Print or Type)	Payments to the left of the estimate. The total of the payments listed must equal the adjusted gross seeds to the issuer set forth in response to Part C — Question 4.b above.  Payments to Officers, Directors, & Affiliates  ries and fees

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

¥ .	E STATE SIGNATURE	4	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>Æ</b>

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Martell Systems, Inc.	Haylan 3625 12-19-06
Name (Print or Type)	Title (Print or Type)
Franklin Pass	President

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	,			AP	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
СТ									
DE								<u> </u>	
DC									
FL				<u> </u>					
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HI					<u> </u>	·			
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									

## APPENDIX 5 2 3 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell explanation of Type of investor and to non-accredited offering price amount purchased in State waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Investors Amount Investors Amount Yes No Yes No State MO MT NE NVNH NJ NM NYNC ND ОН OK OR PA RJ SC SD TN TXUT VT VAWA WV 0 \$2,000.00 \$0.00 WI Common - \$2,000 ×

				'APP	ENDIX		N. W.	τ.			
1		2	3 Type of security		4						
	to non-a	d to sell accredited rs in State B-Item 1)	and aggregate offering price offered in state (Part C-Item 1)	Į.	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY							·				
PR											